# **Complete Summary**

#### TITLE

Uncomplicated urinary tract infection in women: the percentage of women with uncomplicated urinary tract infection (UTI) treated with recommended short course therapy.

## SOURCE(S)

Institute for Clinical Systems Improvement (ICSI). Uncomplicated urinary tract infection in women. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2004 Jul. 21 p. [38 references]

#### **Brief Abstract**

### **DESCRIPTION**

This measure assesses the percentage of women with uncomplicated urinary tract infection (UTI) treated with recommended short course therapy.

#### **RATIONALE**

The priority aim addressed by this measure is to increase the use of short course therapy in women with uncomplicated urinary tract infection (UTI).

#### PRIMARY CLINICAL COMPONENT

Uncomplicated urinary tract infection (UTI); short course antibiotic therapy (either 3 or 7 days); trimethoprim; trimethoprim-sulfamethoxazole; nitrofurantoin (Macrobid); ciprofloxacin

## DENOMINATOR DESCRIPTION

Number of records for adult women ages 18 to 65 with uncomplicated urinary tract infection (UTI) reviewed (see the related "Denominator Inclusions/Exclusions" field in the Complete Summary)

## NUMERATOR DESCRIPTION

Number of records for adult women with uncomplicated urinary tract infection (UTI) receiving the recommended short course prescription therapy (see the related "Numerator Inclusions/Exclusions" field in the Complete Summary)

#### **Evidence Supporting the Measure**

PRIMARY MEASURE DOMAIN

**Process** 

SECONDARY MEASURE DOMAIN

Not applicable

EVIDENCE SUPPORTING THE MEASURE

A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

## NATIONAL GUIDELINE CLEARINGHOUSE LINK

• <u>Uncomplicated urinary tract infection in women.</u>

### Evidence Supporting Need for the Measure

### NEED FOR THE MEASURE

Unspecified

#### State of Use of the Measure

STATE OF USE

Current routine use

**CURRENT USE** 

Internal quality improvement

#### Application of Measure in its Current Use

CARE SETTING

Physician Group Practices/Clinics

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

**Group Clinical Practices** 

TARGET POPULATION AGE Age 18 to 65 years TARGET POPULATION GENDER Female (only) STRATIFICATION BY VULNERABLE POPULATIONS Unspecified INCIDENCE/PREVALENCE Unspecified ASSOCIATION WITH VULNERABLE POPULATIONS Unspecified **BURDEN OF ILLNESS** Unspecified **UTILIZATION** Unspecified **COSTS** Unspecified IOM CARE NEED **Getting Better** IOM DOMAIN Effectiveness

CASE FINDING

Users of care only

### DESCRIPTION OF CASE FINDING

Women ages 18 to 65 with uncomplicated urinary tract infection (UTI)

Medical groups can define the adult women with an encounter for uncomplicated cystitis from their databases, schedules, laboratory log, or whatever method they devise. A random sample of 20 patients seen for this diagnosis during the month can be selected. Each medical record will be reviewed to determine the number of those women receiving the recommended treatment at the initial encounter.

It is suggested that data are collected monthly. When a medical group's reported data have evidenced a performance level above 90% for 7 measurement periods, the medical group may elect to decrease the frequency of data collection. The decrease in frequency can be from 3 monthly samples to 1 sample collected each quarter.

#### DENOMINATOR SAMPLING FRAME

Patients associated with provider

## DENOMINATOR (INDEX) EVENT

Clinical Condition Encounter

## DENOMINATOR INCLUSIONS/EXCLUSIONS

#### Inclusions

Number of records for adult women ages 18 to 65 with uncomplicated urinary tract infection (UTI)\* reviewed

\*A UTI is defined by the International Classification of Diseases, Ninth Revision (ICD-9) codes of 595, 595.0, 595.2, 595.3, 595.8, 595.89, 595.9, 599.0.

Exclusions Unspecified

### NUMERATOR INCLUSIONS/EXCLUSIONS

#### Inclusions

Number of records for adult women with uncomplicated urinary tract infection (UTI) receiving the recommended short course prescription therapy\*

- Trimethoprim-sulfamethoxazole (D.S., 1 twice a day [BID] x 3 days)
- Trimethoprim (100 mg, 1 BID x 3 days)
- Nitrofurantoin (Macrobid, 100 mg BID x 7 days)
- Ciprofloxacin (250 mg BID x 3 days)

<sup>\*</sup>The drugs recommended for short course therapy are as follows:

Exclusions Unspecified

DENOMINATOR TIME WINDOW

Time window is a single point in time

NUMERATOR TIME WINDOW

Encounter or point in time

DATA SOURCE

Administrative data Laboratory data Medical record

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

#### Computation of the Measure

**SCORING** 

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

Internal time comparison

#### Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Unspecified

### Identifying Information

### ORIGINAL TITLE

The percentage of women with uncomplicated UTI treated with recommended short course therapy.

#### MEASURE COLLECTION

Uncomplicated Urinary Tract Infection in Women Measures

#### DEVELOPER

Institute for Clinical Systems Improvement

### **ADAPTATION**

Measure was not adapted from another source.

### RELEASE DATE

2002 Nov

#### REVISION DATE

2004 Jul

## **MEASURE STATUS**

This is the current release of the measure.

This measure updates a previous version: Institute for Clinical Systems Improvement (ICSI). Uncomplicated urinary tract infection in women. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2002 Nov. 24 p.

## SOURCE(S)

Institute for Clinical Systems Improvement (ICSI). Uncomplicated urinary tract infection in women. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2004 Jul. 21 p. [38 references]

## MEASURE AVAILABILITY

The individual measure, "The percentage of women with uncomplicated UTI treated with recommended short course therapy," is published in "Health Care Guideline: Uncomplicated Urinary Tract Infection in Women." This document is available from the <a href="Institute for Clinical Systems Improvement (ICSI)">Institute for Clinical Systems Improvement (ICSI)</a> Web site.

For more information, contact ICSI at, 8009 34th Avenue South, Suite 1200, Bloomington, MN 55425; phone: 952-814-7060; fax: 952-858-9675; Web site: www.icsi.org; e-mail: icsi.info@icsi.org.

#### NQMC STATUS

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